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Application

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PTO/SB/122 (09-04)
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Art Unit -2871 Address to: Commissioner for Patents Examiner Name P.O. Box 1450 Nguyen, Dung T Alexandria, VA 22313-1450 Attorney Docket Number CU-1962 Please change the Correspondence Address for the above-Identified patent application to: The address associated with Customer Number. 26530 OR Firm or Individual Name Address City State Zip Country Telephone Fax This form cannot be used to change the data associated with a Customer Number. To change the data associated with an existing Customer Number use "Request for Customer Number Data Change" (PTO/SB/124). I am the: Applicant/Inventor Assignee of record of the entire Interest. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/98). Attorney or agent of record. Registration Number 25765 Registered practitioner named in the application transmittal letter in an application without an or declaration CFR 1.33(a)(1). Registration Number Signature Typed or Printed Richard _Name Telephone 312-427-1300 <u> A</u>pril 18, 2005 NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below". J •Tote≀of forms are submitted

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